

## ISDH HSP Psychosocial Support Services Service Standard

### **HRSA Service Definition:**

Psychosocial Support Services provide group or individual support and counseling services to assist HRSA RWHAP-eligible PLWH to address behavioral and physical health concerns. Activities provided under the Psychosocial Support Services may include:

- Bereavement counseling
- Caregiver/respite support (HRSA RWHAP Part D)
- Child abuse and neglect counseling
- HIV support groups
- Nutrition counseling provided by a non-registered dietitian (see Medical Nutrition Therapy Services)
- Pastoral care/counseling services

### ***Program Guidance:***

- Funds under this service category may not be used to provide nutritional supplements (See Food Bank/Home Delivered Meals or Medical Nutrition Therapy).
- HRSA RWHAP-funded pastoral counseling must be available to all eligible clients regardless of their religious denominational affiliation.
- HRSA RWHAP Funds may not be used for social/recreational activities or to pay for a client's gym membership.
- For HRSA RWHAP Part D recipients, outpatient mental health services provided to affected clients (people not identified with HIV) should be reported as Psychosocial Support Services; this is generally only a permissible expense under HRSA RWHAP Part D.

### **Key Services Components and Activities:**

Key services components and activities are noted in the Service Standards below.

### **HSP Service Standards:**

Standard	Documentation
<b>1. Personnel Qualifications</b>	
1. Services are provided by trained staff according to personnel policy or procedures set by Subrecipient. a. Individuals who possess a comprehensive knowledge of or professional experience in community health, direct patient health care, public health or social work	1. Documentation of applicable experience and qualifications are in personnel files available for review
<b>2. Eligibility Criteria</b>	
1. Subrecipients must have established criteria for the provision of psychosocial support services that includes, at minimum: a. Eligibility verification consistent with recipient requirements	1. Non-medical case managers must maintain up to date eligibility records for clients according to agency protocol and in any data system required by ISDH. 2. Service providers and sub-recipients must maintain documentation of current eligibility if providing HIV services reimbursable under the RWHAP Part B Program.

	<ul style="list-style-type: none"> <li>Acceptable documentation includes a current eligibility approval letter dated within 6 months of service provision. These letters may be accessed from the client's Non-medical case management, and includes effective and end dates of eligibility and those services for which the client may enroll.</li> </ul> <p>3. Documentation must be made available for review by ISDH upon request.</p>
<b>3. Assessment</b>	
1. Subrecipients should establish criteria for assessment relevant to services provided.	1. A written documentation of policy 2. If assessment is conducted then assessment should be documented in client file
<b>4. Service Delivery</b>	
1. Subrecipients should establish criteria for service delivery relevant to services provided	1. Written documentation of policy 2. Services provided should be documented in client file

**Subservices:**

- Psychosocial Support Services

**Service Unit Definition:**

- Unit = 1 contact